



PTO/SB/21 (02-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/771,312	
	Filing Date	January 26, 2001	
	First Named Inventor	Aya JAKOBOVITS	
	Art Unit	1642	
	Examiner Name	B. Fetterolf	
Total Number of Pages in This Submission	27	Attorney Docket Number	511582000100

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (1 page + duplicate for fee processing) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input checked="" type="checkbox"/> CD, Number of CD(s) <u>2</u>	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): Petition for Revival of an Application for Patent Abandoned Unintentionally etc. (2 pages) Response to Notice to Comply with Requirements etc. (20 pages) Statement to Support Filing and Submission etc (2 pages) Return receipt postcard
Remarks		Customer No. 36327

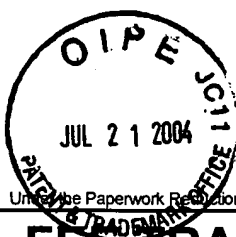
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	MORRISON & FOERSTER LLP James J. Mullen III, Ph.D. - 44,957
Signature	
Date	July 21, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 420263792 US, in an envelope addressed to: MS Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 21, 2004

Signature: (Grace Yu)



FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003. Patent fees are subject to annual revision.</small>		Complete if Known			
		Application Number	09/771,312		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	January 26, 2001		
		First Named Inventor	Aya JAKOBOVITS		
		Examiner Name	B. Fetterolf		
TOTAL AMOUNT OF PAYMENT (\$)		665.00	Attorney Docket No. 511582000100		
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		3. ADDITIONAL FEES			
FEE CALCULATION		Large Entity Small Entity			
1. BASIC FILING FEE		Fee Code Fee (\$) Fee Code Fee (\$) Fee Description Fee Paid			
Large Entity Fee Code (\$)		Small Entity Fee Code (\$)			
1001 770		2001 385		Utility filing fee	
1002 340		2002 170		Design filing fee	
1003 530		2003 265		Plant filing fee	
1004 770		2004 385		Reissue filing fee	
1005 160		2005 80		Provisional filing fee	
SUBTOTAL (1) (\$)		0.00			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims		Extra Claims		Fee from below	Fee Paid
Independent Claims		--** =		x	=
Multiple Dependent		--** =		x	=
Large Entity Fee Code (\$)		Small Entity Fee Code (\$)			
1202 18		2202 9		Claims in excess of 20	
1201 86		2201 43		Independent claims in excess of 3	
1203 290		2203 145		Multiple dependent claim, if not paid	
1204 86		2204 43		** Reissue independent claims over original patent	
1205 18		2205 9		** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)		0.00			
SUBMITTED BY		(Complete if applicable)			
Name (Print/Type) James J. Mullen III, Ph.D.		Registration No. (Attorney/Agent) 44,957		Telephone (858) 720-7940	
Signature [Signature]		Date July 21, 2004			